

October 2002



Montana Board of Pharmacy

Published to promote voluntary compliance of pharmacy and drug law.

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Impaired Health Care Professionals

If statistics are correct, Montana has roughly 160 pharmacists that are impaired by drug or alcohol misuse and abuse. Only a small fraction of these pharmacists are known to be in a recovery program. If you suspect a co-worker might have a problem or if you are concerned about yourself, there is **confidential help** available. The Montana Impaired Pharmacist Program can be reached toll-free at 1-877/748-4400. Please leave a message and your call will be returned. In addition, a Pharmacist's Recovery Network (PRN) Program is in the process of being formed in our state. A call to 406/327-1250 will connect you to a pharmacist who will talk with you, advise you, and refer you to a pharmacist in your area of the state if you so choose. All calls will remain confidential.

Proposed Rule Changes and Additions

The past 15 months have been filled with many proposed rule changes and additions. HB279, our new pharmacy practice act, necessitated many of these changes, while others were proposed to revise outdated board rules and adequately reflect current practice. This flurry of rule-making activity is winding down. We are relieved about that, and know that you must be, too.

The Montana Board of Pharmacy is proposing adoption of the following rules. These proposed rules may also be found on our Web site at www.discoveringmontana.com/dli/pha, along with details of the hearing date and written comment deadline.

8.40.411 Returned Prescription (1) In the best interest, safety and protection of public health and to the pharmacy, no pharmacist shall place in stock for reuse or resale the contents of any prescription, which have been returned after leaving the pharmacy "**except as provided in** _____ (cite of new "med return from long-term care facilities" rule.)

8.40.402(1) All registered pharmacists **licensees** must notify the board **in writing** within 10 days of any change in **location** of their employment **together with the and/or any** change of **business or personal** address.

Inactive license: (new rule)

- 1) A pharmacist may obtain an inactive license through a written request to the Board of Pharmacy, if that pharmacist holds an active Montana pharmacist license in good standing and will not practice in Montana for the period of inactive licensure.
- 2) Pharmacists with an inactive status for three years or less, who wish to return to active practice in the State of Montana, must:
 - a. notify the Board of Pharmacy of the change;
 - b. pay the current active license renewal fee;
 - c. certify that no disciplinary action has been taken by any state or federal jurisdiction which would prevent or restrict the pharmacist's practice of the profession, or has

not surrendered any credential or privilege in the practice of the profession in lieu of or to avoid formal action; and

- d. provide written declaration that continuing education requirements for the period of inactive licensure have been satisfied.
- 3) Pharmacists with an inactive status for more than five years, who have been in active practice in another US jurisdiction and wish to return to active status in the State of Montana, must:
 - a. notify the Board of Pharmacy of the change;
 - b. pay the current active license renewal fee;
 - c. submit verification of active practice from the state or states in which practice has occurred;
 - d. take and pass the Multistate Pharmacy Jurisprudence Examination™ for the State of Montana;
 - e. certify that no disciplinary action has been taken by any state or federal jurisdiction which would prevent or restrict the pharmacist's practice of the profession, or has not surrendered any credential or privilege in the practice of the profession in lieu of or to avoid formal action; and
 - f. provide written declaration that continuing education requirements for the period of inactive licensure have been satisfied.
 - 4) Pharmacists with an inactive status for three to five years who have not been in active practice in another US jurisdiction and wish to return to active status in the State of Montana, must:
 - a. notify the Board of Pharmacy of the change;
 - b. pay the current active license renewal fee;
 - c. serve an appropriate internship of 300 hours or take and pass the North American Pharmacist Licensure Examination™;
 - d. take and pass the Multistate Pharmacy Jurisprudence Examination™ for the State of Montana;
 - e. certify that no disciplinary action has been taken by any state or federal jurisdiction which would prevent or restrict the pharmacist's practice of the profession, or has not surrendered any credential or privilege in the practice of the profession in lieu of or to avoid formal action; and
 - f. provide written declaration that continuing education requirements for the period of inactive licensure have been satisfied.

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- 5) Pharmacists with an inactive status for more than five years who have not been in active practice in another US jurisdiction and wish to return to active status in the State of Montana, must:
- notify the Board of Pharmacy of the change;
 - pay the current active license renewal fee;
 - serve an appropriate internship of 300 hours;
 - take and pass the North American Pharmacist Licensure Examination™;
 - take and pass the Multistate Pharmacy Jurisprudence Examination™ for the State of Montana;
 - certify that no disciplinary action has been taken by any state or federal jurisdiction which would prevent or restrict the pharmacist's practice of the profession, or has not surrendered any credential or privilege in the practice of the profession in lieu of or to avoid formal action; and
 - provide written declaration that continuing education requirements for the period of inactive licensure have been satisfied.

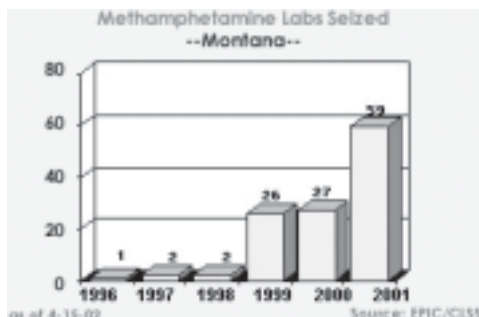
8.40.404 Fee Schedule

(1) through (21) unchanged.

(22) Inactive pharmacist annual renewal fee \$25.

Methamphetamine Abuse: Not Just a Big City Problem

The US Drug Enforcement Administration (DEA) reports that in 2001, 59 meth labs and dump sites were discovered in Montana. In that same period of time, only eight sites were discovered in New York state. In recent years, methamphetamine has become increasingly available throughout Montana. Results from a recent state survey indicated that 13% percent of high school students reported using methamphetamine during 2001. Law enforcement officers across the state identify methamphetamine as the most significant drug problem in their jurisdictions. A pamphlet on methamphetamine abuse produced by the Board is currently being printed and will soon be available for distribution.



Pharmacists are encouraged to be aware of the materials used to "cook" meth, such as pseudoephedrine, lithium from batteries, acetone, matches, Drano® and coffee filters, and share this information with clerks in their pharmacies. Urge clerks and checkers to be aware of unusual purchases. **A recent federal mandate prohibits selling more than three boxes of 30 tablets pseudoephedrine 30mg in any one transaction.**



Joint Statement on the Treatment of Chronic Pain

The Board office receives several calls each month concerning prescriptions written for large quantities of pain medications. Studies have shown that the abuse potential of narcotics is generally low in otherwise healthy patients who do not abuse drugs. Pharmacists and other health care practitioners are encouraged to reverse the trend of under treatment of pain that has been noted in the past, yet remain aware of the dangers of diversion and the nonmedical use of controlled substances. **It is imperative that pharmacists and prescribers establish clear lines of communication regarding their patient's use and possible misuse of prescription medications.**

The Boards of Medical Examiners, Nursing, and Pharmacy have recently signed a joint statement regarding chronic pain treatment. The statement will be sent to all practitioners, and is also available on the Board's Web site, www.discoveringmontana.com/dli/pha. Check the "important notices" section under Board information.

Partial Refills on CIII-CIV Prescriptions

The US Drug Enforcement Administration considers authorized refills for CIII and CIV prescriptions to be valid for the **total number of tablets or capsules authorized or six months from the date of writing, whichever comes first**. At a patient's request, a smaller quantity of tablets or capsules may be dispensed upon each refill, and the total number of partial fillings could potentially exceed five. The six-month time limit must still be observed and accurate records must be maintained to ensure that the total number of tablets authorized is not exceeded.

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